

```
=====
BUS ID:      11457          BUS NAME:    AAA FENCECRAFTERS          TOTAL LICENSES:      1
=====
```

```
BUS ADD'L:
BUS TYPE:    COMMERCIAL  --  COMMERCIAL BUSINESS
BUS STATUS:  Active
```

BUSINESS INFORMATION

```
-----
Business Address:          Billing/Mailing Address:
-----
FENCECRAFTERS, INC.      FENCECRAFTERS, INC.
25 OLD MILL RD SUITE C   25 OLD MILL RD SUITE C
OUT OF STATE LOCATION    ATTN: BUSINESS LICENSING
GREENVILLE, SC 29607   GREENVILLE, SC 29607

Ph:      (864) 627-4279    Ph:
Fax:     (888) 316-4626    Fax:
Car-Rt:                               Car-Rt:
```

```
Business Contact:
-----
Name:    VICKIE ALLEN          Name 2:
Ph:      (864) 627-4279
Email:   VICKIE@SWEDGELOCK.COM
```

```
=====
BUS ID:      11455          BUS NAME:    APR TRUCKING          TOTAL LICENSES:      1
=====
```

```
BUS ADD'L:
BUS TYPE:    RESIDENTIAL  --  RESIDENTIAL BUSINESS
BUS STATUS:  Active
```

BUSINESS INFORMATION

```
-----
Business Address:          Billing/Mailing Address:
-----
P AUTO SALES & TRANSPORT SERVICE, LLC  P AUTO SALES & TRANSPORT SERVICE, LLC
5628 SHAMROCK LN                    5628 SHAMROCK LN
DOUGLASVILLE , GA 30135           ATTN: BUSINESS OWNER
DOUGLASVILLE , GA 30135

Ph:      Ph:
Fax:     Fax:
Car-Rt:  Car-Rt:
```

```
Business Contact:
-----
Name:    PATRICK RESILARD          Name 2:
Ph:      (516) 503-4220
Email:   PAUTOSALESANDTRANSPORT@GMAIL.COM
```

```
=====
BUS ID:      11463          BUS NAME:    ART COUTURE          TOTAL LICENSES:      1
=====
```

```
BUS ADD'L:
BUS TYPE:    COMMERCIAL  --  COMMERCIAL BUSINESS
BUS STATUS:  Active
```

BUSINESS INFORMATION

```
-----
Business Address:          Billing/Mailing Address:
-----
ART COUTURE, LLC          ART COUTURE, LLC
5682 PALAZZO WAY SUITE 105        5682 PALAZZO WAY SUITE 105
DOUGLASVILLE, GA 30134        ATTN: BUSINESS OWNER
DOUGLASVILLE, GA 30134

Ph:      Ph:
Fax:     Fax:
Car-Rt:  Car-Rt:
```

Business Contact:

Name: NATOYA DAWSON
Ph: (404) 883-7971
Email: ARTCOUTUREATLANTA@GMAIL.COM

Name 2: EDWARD JOSEPH

=====
BUS ID: 11449 BUS NAME: DEAN CORP LOGISTICS TOTAL LICENSES: 1
=====

BUS ADD'L:
BUS TYPE: RESIDENTIAL -- RESIDENTIAL BUSINESS
BUS STATUS: Active

BUSINESS INFORMATION

Business Address: Billing/Mailing Address:

DEAN CORP LOGISTICS DEAN CORP LOGISTICS
9993 VILLAGE SOUTH DR 9993 VILLAGE SOUTH DR
DOUGLASVILLE, GA 30135 ATTN: BUSINESS OWNER
DOUGLASVILLE, GA 30135
Ph: Ph:
Fax: Fax:
Car-Rt: Car-Rt:

Business Contact:

Name: GERALD DEAN
Ph: (770) 634-7554
Email: GERALDADEAN@GMAIL.COM

Name 2:

=====
BUS ID: 11467 BUS NAME: DEMO JAM DESIGNS TOTAL LICENSES: 1
=====

BUS ADD'L:
BUS TYPE: RESIDENTIAL -- RESIDENTIAL BUSINESS
BUS STATUS: Active

BUSINESS INFORMATION

Business Address: Billing/Mailing Address:

DEMO JAM DESIGNS, INC DEMO JAM DESIGNS, INC
6285 REDCLIFF DR 6285 REDCLIFF DR
DOUGLASVILLE, GA 30134 ATTN: BUSINESS OWNER
DOUGLASVILLE, GA 30134
Ph: Ph:
Fax: Fax:
Car-Rt: Car-Rt:

Business Contact:

Name: MONICA MOORE
Ph: (770) 366-1245
Email: DEMOJAMDESIGNS@GMAIL.COM

Name 2:

=====
BUS ID: 11454 BUS NAME: EB FILMS TOTAL LICENSES: 1
=====

BUS ADD'L:
BUS TYPE: RESIDENTIAL -- RESIDENTIAL BUSINESS
BUS STATUS: Active

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
EB FILMS                                       EB FILMS
3490 HEARTHSTONE PL                           245 N. HIGHLAND AVE. SUITE 230-713
                                                ATTN: BUSINESS OWNER
DOUGLASVILLE , GA 30135                    DOUGLASVILLE , GA 30135

Ph:                                             Ph:
Fax:                                           Fax:
Car-Rt:                                        Car-Rt:

Business Contact:
-----
Name: EDWARD BARTEL                           Name 2:
Ph: (323) 360-6915
Email: ALTERTHEVISION@GMAIL.COM

```

```

=====
BUS ID:      11459          BUS NAME:  ENHANCING THE QUEEN CUSTOM WIGS AND MORE, LLC TOTAL LICENSES:      1
=====

```

```

BUS ADD'L:
BUS TYPE:  COMMERCIAL  --  COMMERCIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
ENHANCING THE QUEEN CUSTOM WIGS AND MORE, LLC ENHANCING THE QUEEN CUSTOM WIGS AND MORE, LLC
6405 FAIRBURN RD SUITE 200                    PO BOX 1494
                                                ATTN: BUSINESS OWNER
DOUGLASVILLE, GA 30134                    AUSTELL, GA 30168

Ph: (678) 847-7070                           Ph:
Fax:                                           Fax:
Car-Rt:                                        Car-Rt:

Business Contact:
-----
Name: DEMETRIA PHILLIPS                       Name 2:
Ph: (770) 885-3438
Email: ENHANCETHEQUEEN@GMAIL.COM

```

```

=====
BUS ID:      11468          BUS NAME:  EVANS EXPRESS TRANSPORT          TOTAL LICENSES:      1
=====

```

```

BUS ADD'L:
BUS TYPE:  RESIDENTIAL  --  RESIDENTIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
EVANS EXPRESS TRANSPORT                       EVANS EXPRESS TRANSPORT
7511 GRAYSON BRIDGE                           7511 GRAYSON BRIDGE
                                                ATTN: BUSINESS OWNER
DOUGLASVILLE, GA 30134                    DOUGLASVILLE, GA 30134

Ph:                                             Ph:
Fax:                                           Fax:
Car-Rt:                                        Car-Rt:

Business Contact:
-----
Name: CHARLES EVANS                           Name 2:
Ph: (678) 361-2428
Email: BIGLEVANS87@GMAIL.COM

```

```

=====
BUS ID:      11448          BUS NAME:  GILLION AUTO SALES, LLC          TOTAL LICENSES:      1
=====

```

```

BUS ADD'L:
BUS TYPE:  COMMERCIAL  --  COMMERCIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
GILLION AUTO SALES, LLC                         GILLION AUTO SALES, LLC
8314 OFFICE PARK DR SUITE 1B                    8314 OFFICE PARK DR SUITE 1B
DOUGLASVILLE, GA 30134                       ATTN: BUSINESS OWNER
                                                DOUGLASVILLE, GA 30134

Ph: (404) 644-4298                               Ph:
Fax:                                              Fax:
Car-Rt:                                           Car-Rt:

Business Contact:
-----
Name: THADEUS GILLION                           Name 2:LATOSHA GILLION
Ph: (404) 644-3795
Email: THADDEUSGILLION@YAHOO.COM

```

```

=====
BUS ID:      11456          BUS NAME:    KRYSTAL RESTAURANTS, LLC ATL007          TOTAL LICENSES:      1
=====

```

```

BUS ADD'L:
BUS TYPE:    COMMERCIAL -- COMMERCIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
KRYSTAL RESTAURANTS, LLC                       KRYSTAL RESTAURANTS, LLC
5716 HWY 92                                    1455 LINCOLN PKWY SUITE 600
DOUGLASVILLE, GA 30134                       ATTN: BUSINESS LICENSE
                                                ATLANTA, GA 30346

Ph: (770) 351-4500                               Ph:
Fax:                                              Fax:
Car-Rt:                                           Car-Rt:

Business Contact:
-----
Name: ACCOUNTING                               Name 2:
Ph: (770) 351-4247
Email: ACOOUNTING.STAFF@KRYSTAL.COM

```

```

=====
BUS ID:      11450          BUS NAME:    M.A AUTOS, LLC          TOTAL LICENSES:      1
=====

```

```

BUS ADD'L:
BUS TYPE:    COMMERCIAL -- COMMERCIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
M.A AUTOS, LLC                                 M.A AUTOS, LLC
8314 OFFICE PARK DR SUITE 1E                    7071 LITTLE BROOKWAY
DOUGLASVILLE, GA 30134                       ATTN: BUSINESS OWNER
                                                DOUGLASVILLE, GA 30134

Ph: (770) 763-8097                               Ph:
Fax:                                              Fax:
Car-Rt:                                           Car-Rt:

Business Contact:
-----
Name: MAYOKUN ADABALE                           Name 2:
Ph: (678) 788-2857
Email: ADABALE@YAHOO.COM

```

```

=====
BUS ID:      11469          BUS NAME:    MAHOGANY CANDLE COMPANY          TOTAL LICENSES:      1
=====

```

```

BUS ADD'L:
BUS TYPE:    COMMERCIAL -- COMMERCIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
MAHOGANY CANDLE COMPANY, LLC                   MAHOGANY CANDLE COMPANY, LLC
5493 WESTMORELAND SUITE C-300                 6570 COWAN MILL RD
                                                ATTN: BUSINESS OWNER
DOUGLASVILLE, GA 30134                     WINSTON, GA 30187

Ph:                                             Ph:
Fax:                                           Fax:
Car-Rt:                                        Car-Rt:

Business Contact:
-----
Name: IKEDA WILLIAMS                           Name 2:
Ph: (404) 782-0943
Email: MAHOGANYCANDLE1@GMAIL.COM

```

```

=====
BUS ID:      11446          BUS NAME:    NEW VISION COUNSELING CENTER, LLC          TOTAL LICENSES:      1
=====

```

```

BUS ADD'L:
BUS TYPE:    COMMERCIAL  --  COMMERCIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
NEW VISION COUNSELING CENTER, LLC             NEW VISION COUNSELING CENTER, LLC
6311 E STRICKLAND ST                          PO BOX 778
                                                ATTN: BUSINESS OWNER
DOUGLASVILLE, GA 30134                     LITHIA SPRINGS, GA 30122

Ph:                                             Ph:
Fax:                                           Fax:
Car-Rt:                                        Car-Rt:

Business Contact:
-----
Name: KRISTY CHRISTOPHER-HOLLOWAY             Name 2:
Ph: (678) 838-8333
Email: HELP@NEWVISIONCOUNSELINGCENTER.COM

```

```

=====
BUS ID:      11461          BUS NAME:    NORTH STAR VENDING CO. LLC          TOTAL LICENSES:      1
=====

```

```

BUS ADD'L:
BUS TYPE:    RESIDENTIAL  --  RESIDENTIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
NORTH STAR VENDING CO. LLC                   NORTH STAR VENDING CO. LLC
8202 BRODICK LN APT. 8202                    8202 BRODICK LN APT. 8202
                                                ATTN: BUSINESS OWNER
LITHIA SPRINGS, GA 30122                     LITHIA SPRINGS, GA 30122

Ph: (470) 322-5453                            Ph:
Fax:                                           Fax:
Car-Rt:                                        Car-Rt:

Business Contact:
-----
Name: JEREMY WALLACE                          Name 2:
Ph: (470) 588-0923
Email: NSVCATL@GMAIL.COM

```

```

=====
BUS ID:      11471          BUS NAME:    ONCE UPON A CHILD          TOTAL LICENSES:      1
=====

```

```

BUS ADD'L:
BUS TYPE:    COMMERCIAL  --  COMMERCIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
RESALE AWAY, LLC                               RESALE AWAY, LLC
2864 CHAPEL HILL RD                           2864 CHAPEL HILL RD
DOUGLASVILLE , GA 30135                   ATTN: BUSINESS LICENSE
                                              DOUGLASVILLE , GA 30135

Ph:      (678) 742-8712                       Ph:
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: ALLISON SPARTIS                         Name 2:
Ph:      (770) 361-3647
Email: AGSPARTIS@GMAIL.COM

```

```

=====
BUS ID:      11452          BUS NAME:  PURPOSE DRIVEN CONSULTING          TOTAL LICENSES:      1
=====

```

```

BUS ADD'L:
BUS TYPE:   RESIDENTIAL  --  RESIDENTIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
PURPOSE DRIVEN CONSULTING                     PURPOSE DRIVEN CONSULTING
6728 OAKHURST CT                             6728 OAKHURST CT
DOUGLASVILLE, GA 30134                   ATTN: BUSINESS OWNER
                                              DOUGLASVILLE, GA 30134

Ph:                                           Ph:
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: ANGELA GRIZZARD                         Name 2:
Ph:      (770) 685-9401
Email: W8GONGOD@GMAIL.COM

```

```

=====
BUS ID:      11464          BUS NAME:  QUASH SELTZER, LLC/MIXX          TOTAL LICENSES:      1
=====

```

```

BUS ADD'L:
BUS TYPE:   COMMERCIAL  --  COMMERCIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
QUASH SELTZER, LLC                            QUASH SELTZER, LLC
7705 STAPLES DR                              20311 SHERIDAN STREET
LITHIA SPRINGS, GA 30122                   ATTN: BUSINESS LICENSING
                                              PEMBROKE PINES, FL 33082

Ph:      (800) 345-7773                       Ph:
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: ALEX RODRIGUEZ                         Name 2:
Ph:      (954) 728-0587
Email: LEGAL@BANGMIXX.COM

```

```

=====
BUS ID:      11458          BUS NAME:  RAISING A STANDARD, INC.          TOTAL LICENSES:      1
=====

```

```

BUS ADD'L:
BUS TYPE:   COMMERCIAL  --  COMMERCIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

 Business Address:

 RAISING STANDARD, INC. R.A.S
 13031 VETERANS MEMORIAL HWY SUITE 7

 DOUGLASVILLE , GA 30135

 Ph:
 Fax: (888) 510-3816
 Car-Rt:

 Business Contact:

 Name: JOSETTE RUTLAND-BURRUS
 Ph: (678) 392-6224
 Email: RAISEASTANDARDINC@GMAIL.COM

 Billing/Mailing Address:

 3464 BOULDER LANE
 ATTN: JOSETTE RUTLAND-BURRUS
 DOUGLASVILLE , GA 30135

 Ph:
 Fax:
 Car-Rt:

=====
 BUS ID: 11451 BUS NAME: REFLECTIONS FOR YOUR HOME TOTAL LICENSES: 1
 =====

BUS ADD'L:
 BUS TYPE: RESIDENTIAL -- RESIDENTIAL BUSINESS
 BUS STATUS: Active

BUSINESS INFORMATION

 Business Address:

 REFLECTIONS FOR YOUR HOME
 5032 CHAPEL CROSSING

 DOUGLASVILLE , GA 30135

 Ph:
 Fax:
 Car-Rt:

 Business Contact:

 Name: BEVERLY T. HUDSON
 Ph: (678) 313-8787
 Email: BEVTRE@YAHOO.COM

 Billing/Mailing Address:

 REFLECTIONS FOR YOUR HOME
 5032 CHAPEL CROSSING
 ATTN: BUSINESS OWNER
 DOUGLASVILLE , GA 30135

 Ph:
 Fax:
 Car-Rt:

=====
 BUS ID: 11466 BUS NAME: SHEK EVENT PLANNING & DESIGNS TOTAL LICENSES: 1
 =====

BUS ADD'L:
 BUS TYPE: RESIDENTIAL -- RESIDENTIAL BUSINESS
 BUS STATUS: Active

BUSINESS INFORMATION

 Business Address:

 SHEK EVENT PLANNING & DESIGNS, LLC
 3214 COLCHESTER ST

 DOUGLASVILLE , GA 30135

 Ph:
 Fax:
 Car-Rt:

 Business Contact:

 Name: CORLISS SMALLS
 Ph: (678) 234-6453
 Email: SHEKEVENTS4U@GMAIL.COM

 Billing/Mailing Address:

 SHEK EVENT PLANNING & DESIGNS, LLC
 3214 COLCHESTER ST
 ATTN: BUSINESS OWNER
 DOUGLASVILLE , GA 30135

 Ph:
 Fax:
 Car-Rt:

=====
 BUS ID: 11465 BUS NAME: SOLUTIONS FOR HOME CARE, INC. TOTAL LICENSES: 1
 =====

BUS ADD'L:
 BUS TYPE: COMMERCIAL -- COMMERCIAL BUSINESS
 BUS STATUS: Active

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
PACESETTER HOME SERVICES, INC.                 PACESETTER HOME SERVICES, INC.
8418 GRADY ST SUITE A&B                        8418 GRADY ST SUITE A&B
                                                ATTN: BUSINESS OWNER
DOUGLASVILLE, GA 30134                     DOUGLASVILLE, GA 30134

Ph:      (770) 949-0480                       Ph:
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: SHERRY PACE                               Name 2:
Ph:      (678) 343-3776
Email: SHERRYPACE2007@GMAIL.COM

```

```

=====
BUS ID:      11453          BUS NAME:  STALLINGS INSURANCE AGENCY, INC.          TOTAL LICENSES:      1
=====

```

```

BUS ADD'L:
BUS TYPE:  COMMERCIAL  --  COMMERCIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
STALLINGS INSURANCE AGENCY, INC               STALLINGS INSURANCE AGENCY, INC
6588 CHURCH ST                                6588 CHURCH ST
                                                ATTN: BUSINESS OWNER
DOUGLASVILLE, GA 30134                     DOUGLASVILLE, GA 30134

Ph:                                           Ph:
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: MELISSA STALLINGS                       Name 2:
Ph:      (678) 805-0071
Email: MELISSA@STALLINGSIA.COM

```

```

=====
BUS ID:      11462          BUS NAME:  THE CHOP SHOP STUDIO, LLC          TOTAL LICENSES:      1
=====

```

```

BUS ADD'L:
BUS TYPE:  COMMERCIAL  --  COMMERCIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
THE CHOP SHOP STUDIO, LLC                     THE CHOP SHOP STUDIO, LLC
3063 HIGHWAY 5                                3063 HIGHWAY 5
                                                ATTN: BUSINESS OWNER
DOUGLASVILLE , GA 30135                     DOUGLASVILLE , GA 30135

Ph:      (678) 653-8161                       Ph:
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: MICHAEL MATTHEWS                       Name 2:
Ph:      (470) 989-2213
Email: MMATTHEWS424@GMAIL.COM

```

```

=====
BUS ID:      11470          BUS NAME:  TREW, LLC          TOTAL LICENSES:      1
=====

```

```

BUS ADD'L:
BUS TYPE:  COMMERCIAL  --  COMMERCIAL BUSINESS
BUS STATUS: Active

```


BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
TREW, LLC                                       TREW, LLC
5181 NATORP BLVD SUITE 300                     5181 NATORP BLVD SUITE 300
OUT OF STATE LOCATION                         ATTN: BUSINESS LICENSING
MASON, OH 45040                               MASON, OH 45040

Ph:      (513) 214-2663                       Ph:
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: LONI SAATKAMP                            Name 2:KEN MAYNARD
Ph:      (513) 214-2663
Email: LICENSES@TREWAUTOMATION.COM

```

```

=====
BUS ID:      11460          BUS NAME:    V SQUARED SPACES, LLC          TOTAL LICENSES:      1
=====

```

```

BUS ADD'L:
BUS TYPE:    COMMERCIAL -- COMMERCIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
V SQUARED SPACES, LLC                          V SQUARED SPACES, LLC
8385 CHEROKEE BLVD SUITE 201                  5575 STRATHMOOR MANOR CIRCLE
DOUGLASVILLE, GA 30134                     ATTN: BUSINESS OWNER
                                                LITHONIA, GA 30058

Ph:                                           Ph:
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: SHAMEKA KINSEY                          Name 2:
Ph:      (678) 779-5485
Email: VSQUAREDSPACES@GMAIL.COM

```

```

=====
BUS ID:      11447          BUS NAME:    VITAL PHARMACEUTICALS, INC      TOTAL LICENSES:      0
=====

```

```

BUS ADD'L:
BUS TYPE:    COMMERCIAL -- COMMERCIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
VITAL PHARMACEUTICALS, INC                    VITAL PHARMACEUTICALS, INC
7705 STAPLES DR                               1600 N PARK DR
LITHIA SPRINGS, GA 30122                     ATTN: BUSINESS OWNER
                                                FORT LAUDERDALE, FL 33326

Ph:                                           Ph:
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: ACCOUNT PAYABLE                         Name 2:
Ph:      (954) 641-0570
Email: ACCOUNT.PAYABLE@BANGENERGY.COM

```

```

=====
BUS ID:      11472          BUS NAME:    WESTCORE ALPHA DOUGLAS HILL, LLC  TOTAL LICENSES:      2
=====

```

```

BUS ADD'L:
BUS TYPE:    COMMERCIAL -- COMMERCIAL BUSINESS
BUS STATUS: Terminated

```

BUSINESS INFORMATION

Business Address:

WESTCORE ALPHA DOUGLAS HILL, LLC
797 DOUGLAS HILL RD

LITHIA SPRINGS, GA 30122

Ph:
Fax:
Car-Rt:

Business Contact:

Name: SHANA MARION
Ph: (510) 240-5245
Email: SMARION@WESTCORE.NET

Billing/Mailing Address:

WESTCORE ALPHA DOUGLAS HILL, LLC
4350 LA JOLIA VILLAGE DRIVE SUITE 900
C/O WESTCORE PROPERTIES
SAN DIEGO, CA 92122

Ph:
Fax:
Car-Rt:

Name 2:CHRISSEY HARRIS

TOTALS -- Businesses: 27 Licenses: 27